CLAIMS ONLY

Application Number 10661547 **Filing Date**

Applicant(s)

*May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1							51							
3							52							
	1						53							
6							54							
7	1						55							
8							56							
9							57							
10							58							
11							59							
12							60							
13							61							
14							62							
15							63							
16							64							
17							65							
18			1				66							
19			1				67							
20			1				68							
21							69							
22			1				70							
23			1				71							
24							72							
25							73							
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44							92							
45							93							
46							94							
47							95							
48							96							
49							97							
50							98							
							99							
							100							
Total Indep	1		1				Total Indep							
Total Depend	0		7				Total Depend							
Total Claims	1		8				Total Claims							